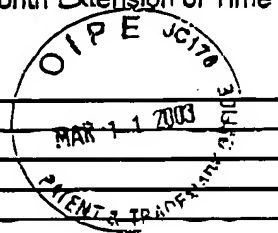


ATTACHMENT E

Atty Docket No.: 3993.002 Serial No.: 10/018,623 Filing Date: 12/18/01Applicant: BERNARD GRITZ AND GARY PHILLIPSTitle/Mark: RADIATION SOURCE FOR ENDOVASCULAR RADIATIONTHE MAIL ROOM STAMP BELOW ACKNOWLEDGES RECEIPT OF THE FOLLOWING
DOCUMENTS ON THE DATE INDICATED ON THE MAIL ROOM STAMP.

<input type="checkbox"/>	Appl'n for Patent/PCT with:	<input type="checkbox"/>	Appl'n for TM/SM with Drawing and _____
	____ pg of specification		specimens of the mark
	____ pg of Claims	<input type="checkbox"/>	Appl'n for Copyright Registration and _____
	____ pg of Drawings Informal/Formal		deposits.
	____ pg of Abstract	<input checked="" type="checkbox"/>	Request for <u>1</u> month Extension of Time
<input type="checkbox"/>	Power of Attorney	<input type="checkbox"/>	Base Issue Fee Forms
<input type="checkbox"/>	Inventor's Declaration	<input type="checkbox"/>	Status Inquiry
<input type="checkbox"/>	Small Entity Status Declaration of Inventor	<input type="checkbox"/>	_____
<input type="checkbox"/>	Small Entity Status Declaration of _____	<input type="checkbox"/>	_____
<input type="checkbox"/>	Information Disclosure Statement	<input type="checkbox"/>	_____
<input checked="" type="checkbox"/>	Amendment <u>A</u>	<input type="checkbox"/>	_____
<input type="checkbox"/>	Assignment	<input type="checkbox"/>	_____
<input type="checkbox"/>	Letter to Draftsman	<input checked="" type="checkbox"/>	Certificate of Mailing Date of <u>3-5-03</u>
	____ pg of Informal Drawings	<input checked="" type="checkbox"/>	Express Mail No.: _____
	____ pg of Formal Drawings		Check No.: <u>8577</u> \$ <u>55.00</u>



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Eberhard FRITZ and Gerd PHILLIPPS

Appln. No.: 10/018,623

Group Art Unit: 3736

Filed: December 18, 2001

Examiner: Samuel Gilbert

For: RADIATION SOURCE FOR ENDOVASCULAR RADIATION TREATMENT

Attorney Docket No.: 3993.002

REQUEST FOR REFUND
PURSUANT TO 37 C.F.R. §1.28

Honorable Commissioner of
Patents and Trademarks
Washington, D.C. 20231

Attn: Refund Section, Accounting Division
Office of Finance

Sir:

Pursuant to 37 C.F.R. §1.28, Applicants are entitled to a refund of \$398.00 based on the following:

1. That an "Claims in excess of twenty" fee in the amount of \$650.00 which was taken out of the undersigned's deposit account on 04/10/03, see Attachment A.

2. That at the time of filing the application on December 18, 2001, a Preliminary Amendment was filed canceling Claims 1-22, and adding Claims 23-48. The Preliminary Amendment contains 3 independent claims, namely Claims 23, 38, and 43. A copy of the Preliminary Amendment and postcard showing evidence that the U.S.P.T.O. received said Preliminary Amendment is attached hereto as Attachments B and C.

U.S. Application No. 10/018,623
REQUEST FOR REFUND

ATTORNEY DOCKET NO.: 3993.002

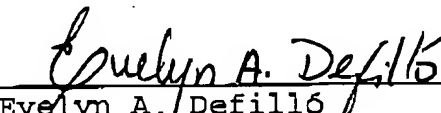
3. That at the time of filing the Amendment A on March 5, 2003, Claims 28, 30, 34, 41, and 47 were re-written in independent form, thus the application contains a total of 8 independent claims. A copy of the Amendment and postcard showing evidence that the U.S.P.T.O. received said Amendment A is attached hereto as Attachments D and E.

Accordingly an excess independent fee of 6 extra independent claims needs to be paid on the application.

Applicants qualify as small entity, thus, the fee for each independent claim is \$42.00. $\$42.00 \times 6 = \252.00 . The deposit account was charged with 650.50.

Accordingly, Applicants hereby request a refund of \$398.00 be credited to our Deposit Account No. 16-0877.

Respectfully submitted,


Evelyn A. Defillio
Registration No. 45,630

PENDORF & CUTLIFF
5111 Memorial Highway
Tampa, Florida 33634-7356
(813) 886-6085

Date: May 7, 2003

U.S. Application No. 10/018,623
REQUEST FOR REFUND

ATTORNEY DOCKET NO.: 3993.002

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the foregoing REQUEST FOR REFUND for U.S. Application No.: 10/018,623 filed December 18, 2001, is being facsimile transmitted to the Patent and Trademark Office, facsimile number (703) 305-8007 on this 7th day of May, 2003.

Evelyn A. Defillio

Type or Print Name of Person Signing Certification

Evelyn A. Defillio
Signature

May 7/03
Date

AUTHORIZATION TO CHARGE

The Commissioner is hereby authorized to charge any additional fees which may be required at any time during the prosecution of this application without specific authorization, or credit any overpayment, to Deposit Account No. 16-0877.

Evelyn A. Defillio
Evelyn A. Defillio